

Name, Address, Phone # & State Bar # of Attorney or Party without Attorney	FOR COURT USE ONLY
Attorney for: SUPERIOR COURT OF CALIFORNIA COUNTY OF YOLO 725 Court Street, Room 103 Woodland, CA 95695 (530) 406-6704	
Petitioner:	Case Number:
Respondent:	REQUEST FOR DEFAULT OR UNCONTESTED HEARING - NULLITY

Hearing set: _____

Please place this proceeding on the court's default or uncontested Family Law Calendar for hearing.

This may be heard as an uncontested matter because:

☐ Default of Respondent was entered on (date): _____

☐ Appearance and Waiver was filed by Respondent on (date): _____

☐ Response and Waiver was filed by Respondent on (date): _____

There is ☐ not a property settlement agreement. If so, a copy:

☐ was filed on (date): _____

☐ is attached

This matter will be personally presented in court by attorney _____

Date: _____

Party

Signature of Attorney/Party without Attorney

Type of Print Name

Indicate preferred hearing dates:

SUBMIT THIS FORM IN DUPLICATE. A COPY WILL BE RETURNED TO YOU WITH THE HEARING DATE.